Introduced by Assembly Member Villaraigosa

December 7, 1998

An act to amend Section 12693.70 of, and to add Section 12693.705 to, the Insurance Code, and to amend Section 14012 of, and to add Section 14005.235 to, the Welfare and Institutions Code, relating to children, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

- AB 43, as introduced, Villaraigosa. Children: Healthy Families Program: eligibility.
- (1) Existing law establishes the Healthy Families Program to arrange for the provision of health services to eligible children. Under existing law, in order to be eligible, an applicant must be applying on behalf of a child, who meets certain requirements, including being in a family having a gross annual household income equal to or less than 200% of the federal poverty level, and meeting the citizenship and immigration status requirements established by federal law.

This bill would require that a child's family have a gross annual household income equal to or less than 250% of the federal poverty level for purposes of eligibility, and would provide that a child who is otherwise eligible for participation shall not be denied eligibility based on the child's date of entry into the United States.

 $AB 43 \qquad -2 -$

Existing law continuously appropriates money from the Healthy Families Fund for purposes of implementation of the Healthy Families Program.

This bill, by liberalizing an eligibility criterion participation within this program and thereby covering a new pool of participants, would make the moneys in this continuously appropriated fund available for a new or expanded purpose, and would thereby result in an appropriation.

(2) Existing law provides for the Medi-Cal program, through which health care benefits are provided to eligible individuals. Existing law requires reaffirmation of eligibility for Medi-Cal benefits for persons, whose eligibility is not determined on the basis of eligibility for CalWORKs program benefit recipients and supplemental security income benefit recipients, on an annual basis or at other times as required by the State Department of Health Services.

This bill would revise Medi-Cal income eligibility standards for otherwise eligible individuals to include any child under 19 years of age whose family income does not exceed 133% of the federal poverty level. This bill would revise the reaffirmation of eligibility requirement to limit reaffirmations of eligibility for Medi-Cal benefits on any basis other than annually to apply only to persons who are 19 years of age or older.

Existing law requires local governments to determine Medi-Cal eligibility. This bill by changing the eligibility standards may increase the number of persons for whom there would have to be an eligibility determination, thus creating a state-mandated local program.

California Constitution requires the reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement, including the creation of a State Mandates Claims Fund to pay the costs of mandates that do not exceed \$1,000,000 statewide and other statewide procedures for claims whose costs exceed \$1,000,000.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs so mandated **—3**— **AB 43**

by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

 $^{2}/_{3}$. Appropriation: yes. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

- SECTION 1. Section 12693.70 of the Insurance Code is amended to read:
- 3 12693.70. To be eligible to participate in the program, an applicant shall meet all of the following requirements:
- 5 (a) Be an applicant applying on behalf of an eligible child, which means a child who is all of the following:
- (1) Greater than 12 months of age and less than 19 years of age. An application may be made on behalf of a child less than 12 months of age for coverage to begin as 10 early as the child's first birthday.
- (2) Not eligible for no-cost full-scope Medi-Cal or 11 12 Medicare at the time of application.
 - (3) In compliance with Sections 12693.71 and 12693.72.

13

18

19

20

22 23

27

- 14 (4) A child who meets citizenship and immigration status requirements that are applicable to persons participating in the program established by Title XXI of 17 the Social Security Act.
 - (5) A resident of the State of California pursuant to Section 244 of the Government Code.
- (6) In a family with a gross annual household income 21 equal to or less than 200 250 percent of the federal poverty
 - (b) If the applicant is applying for the purchasing pool, applicant shall pay the first month's contribution and agree to remain in the program for six months, unless other coverage is obtained and proof of the coverage is provided to the program.
- 28 (c) An applicant shall enroll all of the applicant's 29 eligible children in the program.
- SEC. 2. Section 12693.705 is added to the Insurance 30 Code, to read: 31

AB 43

6

12

13

15

17

21

1 12693.705. A child who is otherwise eligible for participation shall not be denied eligibility based on his or her date of entry into the United States.

This section does not constitute a change in, but is 5 declaratory of, existing law.

SEC. 3. Section 14012 of the Welfare and Institutions Code is amended to read:

14012. Reaffirmation shall be filed annually—and. With respect to the determination of eligibility for any person 10 19 years of age or older, reaffirmation may be required at other times in accordance with general standards established by the department.

SEC. 4. Section 14005.235 is added to the Welfare and 14 Institutions Code, to read:

14005.235. To the extent federal participation 16 available, any child under 19 years of age who meets all the other applicable eligibility requirements shall be 18 eligible for benefits under this chapter if his or her family 19 income does not exceed 133 percent of the federal 20 poverty level.

SEC. 5. Notwithstanding Section 17610 22 Government Code, if the Commission on State Mandates 23 determines that this act contains costs mandated by the reimbursement to local agencies and 25 districts for those costs shall be made pursuant to Part 7 26 (commencing with Section 17500) of Division 4 of Title 27 2 of the Government Code. If the statewide cost of the 28 claim for reimbursement does not exceed one million dollars (\$1,000,000), reimbursement shall be made from 30 the State Mandates Claims Fund.

31 Notwithstanding Section 17580 of the Government 32 Code, unless otherwise specified, the provisions of this act shall become operative on the same date that the act 34 takes effect pursuant to the California Constitution.